PTO/SB/21 (08-03) (AW 10/2003)
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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission 52

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Application Number	09/827,686	
Filing Date	April 6, 2001	
First Named Inventor	Rizzotto et al.	
Art Unit	1731	
Examiner Name	Dionne A. Walls	
Attorney Docket No.	PAR-100US	

E	NCLOSUR	ES (Check all that apply	·)	
Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/Declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53	Drawi Licen Petitic Provis Powe Chan Addre	ing(s) sing-related Papers on on to Convert to a sional Application of Attorney, Revocation, ge of Correspondence		After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please identify below): Post Card
SIGNATURE	OF APPLIC	CANT, ATTORNEY OR AG	GENT	
Firm or Individual Signature Date James C. Simmons James C. Simmons James C. Simmons James C. Simmons	~	Registration No. (Attorney/A	(gent)	24,842
	ICATE OF T	RANSMISSION / MAILING	G _	
I hereby certify that this correspondence is being facsimile postage as first class mail in an envelope addressed to: Co VA 22313-1450 on this date:				January 12, 2004
Name (Print/Type) James C. Simmons	0			
Signature Sumle C	Simm	7	Date	January 12, 2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, ALEXANDRIA, VA 22313-1450**.

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FEE	TR	AN	SM	IT	TAL
•	for	FY	200)4	

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$)	16

	Complete if Known	
Application Number	09/827,686	
Filing Date	April 6, 2001	
First Named Inventor	Rizzotto et al.	
Examiner Name	Dionne A. Walls	
Art Unit	1731	
Attorney Docket No.	PAR-100US	

METHO	DD OF PAYM	ENT (check all that apply)	1			FEE	CALCULATION (continued)	
☑ Check ☐ Cred	fit Card Mo	oney Other None		DITION				
☐ Deposit Account	•	der	Fee Code	Entity Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
Deposit	-		1051	130	2051	65	Surcharge - late filing fee or oath	
Account Number	18-0350		1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
Deposit Account Name	RatnerPrestia	1	1053	130	1053	130	Non-English specification	
The Director is auth	norized to: (che	eck all that apply)	1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
☐ Charge fee(s)	indicated belov		1804	920*	1804	920°	Requesting publication of SIR prior to Examiner action	
☑ Credit any ove☑ Charge any ad☐ Charge fee(s)	Iditional fee(s)	or any underpayment of fee(s) w, except for the filing fee to the	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
above-identifie			1251	110	2251	55	Extension for reply within first month	
	FEE C	ALCULATION	1252	420	2252	210	Extension for reply within second month	
1. BASIC FILI	NG FEE		1253	950	2253	475	Extension for reply within third month	
	mall Entity	,	1254	1,480	2254	740	Extension for reply within fourth month	
	ee Fee ode (\$)	Fee Description Fee Paid	1255	2,010	2255	1,005	Extension for reply within fifth month	
		Utility filing fee	1401	330	2401	165	Notice of Appeal	
	002 170	Design filing fee	1402	330	2402	165	Filing a brief in support of an appeal	165
	003 265	Plant filing fee	1403	290	2403	145	Request for oral hearing	
	004 385 005 80	Reissue filing fee Provisional filling fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1000 100 20			1452	110	2452	55	Petition to revive – unavoidable	
	SUBTOTA	L (1) (\$) 0	1453	1,330	2453	665	Petition to revive – unintentional	
2. EXTRA CLAIM	FEES FOR U	TILITY AND REISSUE	1501	1,330	2501	665	Utility issue fee (or reissue)	
		Extra Fee from Fee Claims below Paid	1502	480	2502	240	Design issue fee	
Total Claims Independent	-20** =	0 X = 0	1503	640	2503	320	Plant issue fee	
Claims	3** =	0 X = 0	1460	130	1460	130	Petitions to the Commissioner	
Multiple Dependent		x = 0	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
Large Entity	Small Entity		1806	180	1806	180	Submission of Information Disclosure Stmt	
Fee Fee Code (\$)	Fee Fee Code (\$)	Fee Description	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1202 18	2202 9	Claims in excess of 20	1809	770	2809	385	Filing a submission after final rejection (37	
1201 86	2201 43	Independent claims in excess of 3	1810	770	2810	385	CFR § 1.129(a)) For each additional invention to be	
1203 290	2203 145	Multiple dependent claim, if not paid ** Reissue independent claims over	1310	110	2010	J.J.J	examined (37 CFR § 1.129(b))	
1204 86	2204 43	original patent	1801	770	2801	385	Request for Continued Examination (RCE)	
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent	1802	900	1802	900	Request for expedited examination of a design application	
	S	SUBTOTAL (2) (\$) 0	Other	fee (spe	ecify)			
		er; For Reissues, see above	*Red	uced by	Basic F	Filing Fe	e Paid SUBTOTAL (3) (\$) 165	

SUBMITTED BY				C	omplete (if applicable)	
Name (Print/Type)	James 🖪 Simmons	Registration No. Attorney/Agent)	24,842	Telephone	610-530-8100	
Signature	James C	Simme		Date	January 12, 2004	
	//WARNING: Info	rmation on this form may become pu	blic. Credit care	d information should	1 not	

be included on this form. Provide credit card information and authorization on PTO-2038.

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